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### **Clinician Public Health Advisory**

#### **Update 1 - Surveillance for Severe Acute Respiratory Syndromes (SARS) in Patients with recent travel to Asia or their close contacts.**

The South Carolina Department of Health and Environmental Control (SC DHEC), in conjunction with the federal Centers for Disease Control and Prevention (CDC), is requesting heightened surveillance for persons presenting with symptoms consistent with Severe Acute Respiratory Syndromes (SARS)

#### **Clinical and Epidemiological Indicators:**

We have asked clinicians to be alert for patients with onset of illness after February 1, 2003 with:

- Fever ( $>38^{\circ}\text{C}$ , or  $100.4^{\circ}\text{F}$ )

**AND**

- One or more signs or symptoms of respiratory illness including cough, shortness of breath, difficulty breathing, hypoxia, radiographic findings of pneumonia, or respiratory distress,

**AND** One or more of the following:

- History of travel to Hong Kong or Guangdong Province in People=s Republic of China, or Hanoi, Vietnam, within seven days of symptom onset.
- Close contact with persons with respiratory illness having the above travel history.
- Close contact includes having cared for, having lived with, or having had direct contact with respiratory secretions and body fluids of a person with SARS.

The Centers for Disease Control and Prevention is assisting the World Health Organization (WHO) in investigating an outbreak of a severe acute respiratory syndrome of unknown etiology. Cases have been reported in China (Guangdong Province and the Hong Kong Special Administrative Region), Vietnam, Canada, Indonesia, Philippines, Singapore, and Thailand. This disease has been characterized by secondary transmission in the health care setting and within households. Most of the identified index cases have traveled to China and a few have had no reported contact with health care workers or sick patients while in China. Approximately 150

cases have been reported. Cases have generally had a brief incubation period (3-5 days). At least two suspect cases have traveled in New York City and Atlanta while symptomatic.

### **Diagnostic Evaluation**

Initial diagnostic testing should include chest radiograph, pulse oximetry, blood cultures, sputum Gram's stain and culture, and testing for viral respiratory pathogens, notably influenza A and B and respiratory syncytial virus. Clinicians should save any available clinical specimens (respiratory, blood, and serum) for additional testing until a specific diagnosis is made. Clinicians should evaluate persons meeting the above description and, if indicated, admit them to the hospital. Close contacts and healthcare workers should seek medical care for symptoms of respiratory illness.

### **Infection Control**

If the patient is admitted to the hospital, clinicians should notify infection control personnel immediately. Until the etiology and route of transmission are known, in addition to standard precautions, infection control measures for inpatients should include:

- Airborne precautions (including an isolation room with negative pressure relative to the surrounding area and use of an N-95 respirator for persons entering the room)
- Contact precautions (including use of gown and gloves for contact with the patient or their environment)

Standard precautions routinely include careful attention to hand hygiene. When caring for patients with SARS, clinicians should wear eye protection for all patient contact.

To minimize the potential of transmission outside the hospital, case patients as described above should limit interactions outside the home until the epidemiology of illness transmission is better understood. Placing a surgical mask on case patients in ambulatory healthcare settings, during transport, and during contact with others at home is prudent.

### **Reporting**

**Any suspected or probable case(s) should be reported immediately.** Healthcare providers and should report cases of SARS, as described above, to their state or local health departments, at the following numbers:

District/County Health Department phone numbers:

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Statewide Urgently Reportable Conditions and Consultation number (24hr/7day): 1-888-847-0902

### **Additional Sources of Information**

For more information contact your state or local health department, or the CDC Emergency Operations Center 770-488-7400.

For additional information on this evolving outbreak, check the following websites:

Centers for Disease Control and Prevention

[www.cdc.gov](http://www.cdc.gov)

World Health Organization

[www.who.int/en/](http://www.who.int/en/)